



Bib Data Sheet


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<b>SERIAL NUMBER</b> 09/586,307	<b>FILING DATE</b> 06/02/2000 <b>RULE</b> -	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> RRTHP0102US	
<b>APPLICANTS</b> Rochelle B. Roth, Shaker Heights, OH ; Brian Smith, Cleveland Heights, OH ; William Brazis, Medina, OH ; Roger H. Ramsey, Akron, OH ;					
<b>** CONTINUING DATA *****</b> None <i>u</i>					
<b>** FOREIGN APPLICATIONS *****</b> None <i>u</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 07/28/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>u</i> Verified and Acknowledged		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 88	<b>INDEPENDENT CLAIMS</b> 9
<b>ADDRESS</b> Cynthia S Murphy Renner Otto Boisselle & Sklar PLL 19th Floor 1621 Euclid Ave Cleveland ,OH 44115					
<b>TITLE</b> Massage device					
<b>FILING FEE RECEIVED</b> 1191	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:				
		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			